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Substitute for Form PTO-875											
CLAIMS AS FILED – PART I (Column 1) ; (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMBER EXTRA							RATE	FEE_		RATE	FEE
BASIC FEE (37 CFR 1.16(a))							\$	OR	Busc	:7,70	
TOTAL CLAIMS 20					x :	=		OR	x s 18=		
INDEPENDENT CLAIMS 2				x	·=		OR	x \$ <u>86=</u>			
(37 GFR 1.16(b))						+ :	=		OR	<u> 2990</u> 2+	
MOETIFEE DET ENDETT GETAINT TEGET							TOTAL		OR	TOTAL	770.0
* If the difference in column 1 is less than zero, enter *0" in column 2.											
CLAIMS AS AMENDED - PART II									0.5	OTHER	R THAN
	(Column 1) (Column 2) (Column 3)						SMALL E	NTITY	OR 1 I		ENTITY
AMENDMENT A	91416	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	AMENDMENT	Minus	·· ?Ø	= /	×	\$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	• 3	Minus	" 3	=	×	s=		OR	× /5=	
AME		ATION OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1,16(d))		s=	/	OR /	+ \$=	
لنـــ	,'	THE THE PARTY OF T					OTAL DD'L FEE		OR	TOTAL ADD'L FEE	
						, ,,			-4		
		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	1 [0.75	ADDI-	7	RATE	ADDI-
T B		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	TIONAL		:	TIONAL
AMENDMENT	Talel	AMENDMENT	Minus	PAID FOR	=	┨┝		FEE	-	x . =	
	Total (37 CFR 1.16(c))			•••		 ∤ ├ [×]	<u>\$</u> =	 	OR	^*	
	Independent (37 CFR 1,16(b))	•	Minus			┨ _╏ ┞≚	\$=	-	OR	× \$=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						· \$=		OR	+ s =	ļ
							OTAL DD'L FEE	L	OR	ADD'L FEE	<u>L_:</u>
	(Column 1) (Column 2) (Column 3)					_			٦		
AMENDMENT C		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Tolal	* AMENDMENT	Minus	PAID FOR	=	1 ,	(\$=		OR	x \$=	
	(37 CFR 1,16(c)) Independent	•	Minus		+=	1	< s =		OR	x \$=	
	(37 CFR 1.16(b))					1	`	1	OR	+ \$ _=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						با لـ	FOTAL	-	-1	TOTAL	1
					ita "O" in colum		ADD'L FEE	L	OR	ADD'L FEE	L
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. Ine 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 mnutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.